



**DECEMBER 2005 MONTHLY REPORT**  
**(Updated February 2006)**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.  
December 2005 Monthly Report - Updated February 2006

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**  
**MONTHLY STATISTICS FOR December 2005 MONTH END**  
**EXECUTIVE SUMMARY**

	December 2005	June 2005
Bank Summary		
Checkwrite	\$7,802,420	\$11,313,720
Book Balance (US Bank & State General Account)	\$51,859,495	\$47,991,033

Enrollment		
Plan 1A	7,657	7,913
Plan 1B	9,720	9,630
Plan 2	1,570	1,713
Total	18,947	19,256
New Applications Received	517	682

Claims		
Claims Processed	108,085	115,201
Average Processing Days	4.21	11.64
Claim Inventory - Over 30 Days Old	216	2,750
Claim Inventory - Total	4,535	14,096
Claims Denied (NonPBM)	7,075	9,303
Claims Denied (PBM)	16,712	16,979
Claim Accuracy Performance	98.10%	99.06%

Customer Service - HIRSP		
Number of Calls Received	10,808	18,966
Percentage of Calls Answered	99.00%	96.50%
Written Correspondence - Received	222	876
Written Correspondence - Completed	167	1,184
Written Correspondence - Inventory	82	344
Average Hold Time for Telephone Calls	0.25	0.57

**Please note: Due to the transition of HIRSP plan administration services to a new contractor effective April 1, 2005 claims volumes, payments and other operational statistics may be accounted for differently. Care should be used when trying to compare data from prior to April 1, 2005 to data from April 1, 2005 going forward.**

**Also note that adjustments as reported by the previous administrator are no longer being counted in reports found on pages 26, 27 and 28 beginning with April 2005 data.**

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
DECEMBER 2005 MONTHLY REPORT  
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# Wisconsin Health Insurance Risk-Sharing Plan

## Breakdown of Incurred Claims and Earned Premium by Quarter and Plan

2Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$22,028,675	\$10,446,926	210.9%	\$880.02	\$417.34
Plan 1B	11,195,254	9,078,492	123.3%	449.32	364.36
Plan 2	4,679,858	2,092,994	223.6%	890.21	398.13
Total	\$37,903,786	\$21,618,413	175.3%	\$686.60	\$391.60
3Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$20,805,045	\$11,627,516	178.9%	\$842.62	\$470.92
Plan 1B	11,317,477	10,348,024	109.4%	448.22	409.82
Plan 2	4,850,578	2,438,376	198.9%	934.06	469.55
Total	\$36,973,100	\$24,413,917	151.4%	\$670.60	\$442.81
4Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$25,401,592	\$11,459,604	221.7%	\$1,040.84	\$469.56
Plan 1B	14,347,792	10,461,572	137.1%	561.16	409.17
Plan 2	5,135,687	2,436,761	210.8%	993.17	471.24
Total	\$44,885,071	\$24,357,937	184.3%	\$813.96	\$441.72
1Q05					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$21,629,602	\$10,781,000	200.6%	\$933.28	\$465.18
Plan 1B	12,455,189	11,235,000	110.9%	449.40	405.38
Plan 2	4,561,144	2,380,000	191.6%	894.52	466.76
Total	\$38,645,935	\$24,396,000	158.4%	\$690.23	\$435.72
2Q05					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$22,082,599	\$10,918,770	202.2%	\$939.17	\$464.37
Plan 1B	13,306,945	10,810,698	123.1%	467.42	379.74
Plan 2	4,881,223	2,144,285	227.6%	953.74	418.97
Total	\$40,270,767	\$23,873,753	168.7%	\$939.17	\$418.10
3Q05					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$22,537,227	\$12,087,026	186.5%	\$970.72	\$520.61
Plan 1B	15,850,605	13,392,242	118.4%	550.64	465.23
Plan 2	5,052,593	2,760,043	183.1%	998.14	545.25
Total	\$43,440,425	\$28,239,310	153.8%	\$761.24	\$494.86

NOTES:

- Loss Ratio = Incurred Claims / Earned Premiums
- Earned Premium includes Premium Subsidies
- Incurred Claims include Provider Contributions
- Administrative Expenses are not included in this exhibit
- Incurred Claims and Earned Premiums are updated quarterly and restated to reflect the most current information available as of December 31, 2005

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan  
Financial Report Notes  
For the Period Ending December 31, 2005**

The motions adopted by the HIRSP Board of Governors regarding changes are summarized as follows:

- 1) Convene the Actuarial Advisory Subcommittee for the purpose of advising the FOC and Board regarding a market-based benchmark for program costs for use in establishing the SFY06 Budget.
- 2) The Board acknowledges that the current problem of the growing provider contribution and program costs is a function of several factors including increasing provider charges and provider payment rates not keeping pace with inflation. The Board acknowledges that the above referenced motion is an interim solution and would have recommended a 5% provider payment increase effective March 1, 2005 if not for administrative issues associated with the April 1, 2005 transition of plan administrators. The Board will reduce the SFY06 provider surplus by \$1.5 million to compensate for not changing the provider payment rate effective April 1, 2005.

**Wisconsin Health Insurance Risk Sharing Plan  
Financial Report Notes  
For the Period Ending December 31, 2005**

These monthly reports do not include the June 30, 2002 CAFR<sup>1</sup> (Combined Annual Financial Report) adjustments. When these adjustments are available, the monthly report will reflect these changes. Previously issued monthly reports will not be reissued but the financial statement notes for the current month will summarize the CAFR adjustment.

- 1) **Policyholder Retained Earnings, End of Period (page 3 & 9)**  
The policyholder retained earnings include both assigned and unassigned surplus (see Interim Reconciliation page 6 and 12 for the breakdown)
- 2) **Other Receivables (page 7 & 13)**  
Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.
- 3) **Losses Paid or Approved for Payment (page 3 & 9)**  
Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.

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<sup>1</sup> CAFR is the State of Wisconsin annual financial report published by DOA (Dept. of Admin.) and prepared in accordance with GASB (Governmental Accounting Standards Board).

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan  
for the Period Ended December 31, 2005  
Fiscal Year 2006**

Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings													
Operating Revenues	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
Gross Premiums	8,889,521	9,430,635	9,919,154	9,208,729	9,566,310	9,565,274	-	-	-	-	-	-	56,579,623
Premium Subsidized	(414,793)	(418,017)	(414,408)	(421,805)	(419,263)	(419,069)	-	-	-	-	-	-	(2,507,355)
Net Premium Revenues	8,474,728	9,012,618	9,504,746	8,786,924	9,147,047	9,146,205	-	-	-	-	-	-	54,072,268
Provider Contribution	2,478,376	2,208,753	3,387,625	2,431,855	2,958,814	3,081,949	-	-	-	-	-	-	16,547,372
Insurer Assessments	3,239,924	3,239,924	3,239,924	3,239,924	3,239,924	3,239,924	-	-	-	-	-	-	19,439,544
Total Operating Revenues	14,193,028	14,461,295	16,132,295	14,458,703	15,345,785	15,468,078	-	-	-	-	-	-	90,059,184
Operating Expenses													
Medical Losses:													
Losses Paid or Approved for Payment <sup>(3)</sup>	8,968,093	12,415,734	10,649,147	10,001,181	11,397,611	10,269,160	-	-	-	-	-	-	63,700,926
Increase (Decrease) in Unpaid Losses	346,665	(1,528,617)	1,786,574	(1,062,608)	(637,881)	1,033,797	-	-	-	-	-	-	(62,070)
Deductible Subsidy Paid	48,493	56,126	47,288	40,031	38,242	29,839	-	-	-	-	-	-	260,019
Total Medical Losses	9,363,251	10,943,243	12,483,009	8,978,604	10,797,972	11,332,796	-	-	-	-	-	-	63,898,875
Pharmacy Losses:													
Losses Paid or Approved for Payment <sup>(4)</sup>	3,648,421	4,235,825	4,011,497	3,899,125	4,255,524	4,070,543	-	-	-	-	-	-	24,120,935
Increase (Decrease) in Unpaid Losses	79,933	(799,220)	422,513	(99,752)	(45,047)	135,516	-	-	-	-	-	-	(306,057)
Drug Rebates	(230,293)	(251,764)	(242,022)	(249,006)	(288,081)	(440,124)	-	-	-	-	-	-	(1,701,290)
Subsidy - Coinsurance Out-of-Pocket Max	33,131	43,341	44,206	49,441	52,884	60,004	-	-	-	-	-	-	283,007
Total Pharmacy Losses	3,531,192	3,228,182	4,236,194	3,599,808	3,975,280	3,825,939	-	-	-	-	-	-	22,396,595
Total Losses	12,894,443	14,171,425	16,719,203	12,578,412	14,773,252	15,158,735	-	-	-	-	-	-	86,295,470
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
WPS Admin Fees	402,149	403,846	400,577	389,371	387,094	431,826	-	-	-	-	-	-	2,414,863
Navitus Admin Fees	107,223	107,228	104,720	104,863	104,110	104,209	-	-	-	-	-	-	632,353
DHFS Admin Fees	38,244	22,953	33,719	18,191	14,443	47,633	-	-	-	-	-	-	175,183
EDS Admin Fees	-	-	-	-	(2,333)	-	-	-	-	-	-	-	(2,333)
UGS Admin Fees	-	-	-	-	-	-	-	-	-	-	-	-	-
Milliman USA Actuarial Services	18,329	14,088	8,747	4,514	11,285	9,105	-	-	-	-	-	-	66,068
Other Admin Fees	-	-	8,000	2,500	2,500	2,825	-	-	-	-	-	-	15,825
Total Administrative Expenses	565,945	548,115	555,763	519,439	517,099	595,598	-	-	-	-	-	-	3,301,959
Referral fees	5,390	8,610	6,125	7,735	5,705	4,865	-	-	-	-	-	-	38,430
Total Operating Expenses	13,465,778	14,728,150	17,281,091	13,105,586	15,296,056	15,759,198	-	-	-	-	-	-	89,635,859
Net Operating Income (Loss)	727,250	(266,855)	(1,148,796)	1,353,117	49,729	(291,120)	-	-	-	-	-	-	423,325
Non-Operating Revenues (Expenses)													
Federal Grant	-	-	-	-	-	2,500,578	-	-	-	-	-	-	2,500,578
Investment income	122,541	112,533	123,596	150,676	153,028	156,203	-	-	-	-	-	-	818,577
Total Non-operating Revenues (Expenses)	122,541	112,533	123,596	150,676	153,028	2,656,781	-	-	-	-	-	-	3,319,155
Net Income (Loss)	849,791	(154,322)	(1,025,200)	1,503,793	202,757	2,365,661	-	-	-	-	-	-	3,742,480
Additions to Retained Earnings													
Policyholder													
Retained Earnings, Beginning of Period	9,542,625	10,556,803	11,377,215	11,148,262	12,727,201	13,353,495	-	-	-	-	-	-	9,542,625
Unfunded Policyholder Subsidies	-	-	-	-	-	(1,100,223)	-	-	-	-	-	-	(1,100,223)
Current Earnings	1,014,178	820,412	(228,953)	1,578,939	626,294	1,847,573	-	-	-	-	-	-	5,658,443
Retained Earnings, End of Period <sup>(1)</sup>	10,556,803	11,377,215	11,148,262	12,727,201	13,353,495	14,100,845	-	-	-	-	-	-	14,100,845
Providers													
Retained Earnings, Beginning of Period	(2,718,521)	(3,140,677)	(4,093,896)	(4,372,422)	(4,769,294)	(5,076,055)	-	-	-	-	-	-	(2,718,521)
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(422,156)	(953,219)	(278,526)	(396,872)	(306,761)	224,978	-	-	-	-	-	-	(2,132,556)
Retained Earnings, End of Period	(3,140,677)	(4,093,896)	(4,372,422)	(4,769,294)	(5,076,055)	(4,851,077)	-	-	-	-	-	-	(4,851,077)
Insurers													
Retained Earnings, Beginning of Period	3,677,147	4,016,540	4,094,492	3,668,265	4,079,463	4,053,813	-	-	-	-	-	-	3,677,147
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	339,393	77,952	(426,227)	411,198	(25,650)	382,953	-	-	-	-	-	-	759,619
Retained Earnings, End of Period	4,016,540	4,094,492	3,668,265	4,079,463	4,053,813	4,436,766	-	-	-	-	-	-	4,436,766
Unfunded Deductible and Coinsurance Subsidy													
Retained Earnings, Beginning of Period	(1,100,223)	(1,181,847)	(1,281,314)	(1,372,808)	(1,462,280)	(453,183)	-	-	-	-	-	-	-
Current Earnings	(81,624)	(99,467)	(91,494)	(89,472)	(91,126)	(89,843)	-	-	-	-	-	-	(543,026)
Retained Earnings, End of Period	(1,181,847)	(1,281,314)	(1,372,808)	(1,462,280)	(1,553,406)	(543,026)	-	-	-	-	-	-	(543,026)
Total Retained Earnings	10,250,819	10,096,497	9,071,297	10,575,090	10,777,847	13,143,508	-	-	-	-	-	-	13,143,508

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
2006 FISCAL YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSES  
AS OF DECEMBER 2005**

MISC REVENUE	JUL 05	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
<b>TOTAL MISC REVENUE</b>	-	-	-	-	-	-	-	-	-	-	-	-	-

MISC ADMIN EXP	JUL 05	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
LAB Audit Fee			7,500.00	2,500.00	2,500.00	2,500.00							15,000.00
NASCHIP			500.00										500.00
Independent Review						325.00							325.00
													-
													-
													-
													-
													-
													-
													-
													-
													-
													-
													-
<b>TOTAL MISC ADMIN EXP</b>	-	-	8,000.00	2,500.00	2,500.00	2,825.00	-	-	-	-	-	-	15,825.00

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.



**Wisconsin Health Insurance Risk Sharing Plan  
Fiscal Year 2006 Interim Reconciliation  
As Of December 31, 2005**

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
<b>1. Operating and Administrative Costs under s.149.143(1)</b>													
Medical Losses Paid or Approved for Payment	8,968,093	12,415,734	10,649,147	10,001,181	11,397,611	10,269,160	-	-	-	-	-	-	63,700,926
Increase (Decrease) in Unpaid Medical Losses	346,665	(1,528,617)	1,786,574	(1,062,608)	(637,881)	1,033,797	-	-	-	-	-	-	(62,070)
Pharmacy Losses Paid or Approved for Payment	3,648,421	4,235,825	4,011,497	3,899,125	4,255,524	4,070,543	-	-	-	-	-	-	24,120,935
Increase (Decrease) in Unpaid Pharmacy Losses	79,933	(799,220)	422,513	(99,752)	(45,047)	135,516	-	-	-	-	-	-	(306,057)
Drug Rebates	(230,293)	(251,764)	(242,022)	(249,006)	(288,081)	(440,124)	-	-	-	-	-	-	(1,701,290)
Total Administrative Expenses	571,335	556,725	561,888	527,174	522,804	600,463	-	-	-	-	-	-	3,340,389
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	13,384,154	14,628,683	17,189,597	13,016,114	15,204,930	15,669,355	-	-	-	-	-	-	89,092,833
<b>2. Adjustments to Operating and Administrative Costs</b>													
Total Non-operating Revenue (Expense)	122,541	112,533	123,596	150,676	153,028	2,656,781	-	-	-	-	-	-	3,319,155
<b>3. Total Fiscal Year Program Costs to be Split 60% 20% 20%</b>	13,261,613	14,516,150	17,066,001	12,865,438	15,051,902	13,012,574	-	-	-	-	-	-	85,773,678
<b>4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)</b>													
Funding Shares													
60% Policyholders	7,956,967	8,709,690	10,239,601	7,719,262	9,031,142	7,807,544	-	-	-	-	-	-	51,464,206
20% Providers	2,652,323	2,903,230	3,413,200	2,573,088	3,010,380	2,602,515	-	-	-	-	-	-	17,154,736
20% Insurers	2,652,323	2,903,230	3,413,200	2,573,088	3,010,380	2,602,515	-	-	-	-	-	-	17,154,736
<b>5. Subsidy Funding Shares</b>													
Premium subsidies	414,793	418,017	414,408	421,805	419,263	419,069	-	-	-	-	-	-	2,507,355
Deductible Subsidies	48,493	56,126	47,288	40,031	38,242	29,839	-	-	-	-	-	-	260,019
Subsidy - coinsurance out-of-pocket Max	33,131	43,341	44,206	49,441	52,884	60,004	-	-	-	-	-	-	283,007
Total Subsidies	496,417	517,484	505,902	511,277	510,389	508,912	-	-	-	-	-	-	3,050,381
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	248,209	258,742	252,951	255,639	255,195	254,456	-	-	-	-	-	-	1,525,192
Insurers	248,208	258,742	252,951	255,638	255,194	254,456	-	-	-	-	-	-	1,525,189
<b>6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)</b>													
Policyholders	7,956,967	8,709,690	10,239,601	7,719,262	9,031,142	7,807,544	-	-	-	-	-	-	51,464,206
Providers	2,900,532	3,161,972	3,666,151	2,828,727	3,265,575	2,856,971	-	-	-	-	-	-	18,679,928
Insurers	2,900,531	3,161,972	3,666,151	2,828,726	3,265,574	2,856,971	-	-	-	-	-	-	18,679,925
<b>7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)</b>													
Policyholders													
Premium	8,474,728	9,012,618	9,504,746	8,786,924	9,147,047	9,146,205	-	-	-	-	-	-	54,072,268
Premium and Deductible Subsidies Credited to Policyholders	496,417	517,484	505,902	511,277	510,389	508,912	-	-	-	-	-	-	3,050,381
Subtotal	8,971,145	9,530,102	10,010,648	9,298,201	9,657,436	9,655,117	-	-	-	-	-	-	57,122,649
Providers	2,478,376	2,208,753	3,387,625	2,431,855	2,958,814	3,081,949	-	-	-	-	-	-	16,547,372
Insurers	3,239,924	3,239,924	3,239,924	3,239,924	3,239,924	3,239,924	-	-	-	-	-	-	19,439,544
Total	14,689,445	14,978,779	16,638,197	14,969,980	15,856,174	15,976,990	-	-	-	-	-	-	93,109,565

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

## 8. Interim Estimate of Surplus/(Deficit) Account Balance for FY 2006

### Policyholders

Prior Period Surplus / (Deficit)	9,542,625	10,556,803	11,377,215	11,148,262	12,727,201	13,353,495	-	-	-	-	-	-	9,542,625
Premium (Including Premium and Deductible Subsidies)	8,971,145	9,530,102	10,010,648	9,298,201	9,657,436	9,655,117	-	-	-	-	-	-	57,122,649
Less Cost	7,956,967	8,709,690	10,239,601	7,719,262	9,031,142	7,807,544	-	-	-	-	-	-	51,464,206
Less Unfunded Policyholder Subsidies	-	-	-	-	-	1,100,223	-	-	-	-	-	-	1,100,223
Monthly Change	1,014,178	820,412	(228,953)	1,578,939	626,294	747,350	-	-	-	-	-	-	4,558,220
Ending Surplus / (Deficit)	10,556,803	11,377,215	11,148,262	12,727,201	13,353,495	14,100,845	-	-	-	-	-	-	14,100,845
Assigned Surplus to SFY 2006	-	-	-	-	-	-	-	-	-	-	-	-	-
Unassigned Surplus	10,556,803	11,377,215	11,148,262	12,727,201	13,353,495	14,100,845	-	-	-	-	-	-	14,100,845

### Providers

Prior Period Surplus / (Deficit)	(2,718,521)	(3,140,677)	(4,093,896)	(4,372,422)	(4,769,294)	(5,076,055)	-	-	-	-	-	-	(2,718,521)
Contribution	2,478,376	2,208,753	3,387,625	2,431,855	2,958,814	3,081,949	-	-	-	-	-	-	16,547,372
Less Cost	2,900,532	3,161,972	3,666,151	2,828,727	3,265,575	2,856,971	-	-	-	-	-	-	18,679,928
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(422,156)	(953,219)	(278,526)	(396,872)	(306,761)	224,978	-	-	-	-	-	-	(2,132,556)
Ending Surplus / (Deficit)	(3,140,677)	(4,093,896)	(4,372,422)	(4,769,294)	(5,076,055)	(4,851,077)	-	-	-	-	-	-	(4,851,077)

### Insurers

Prior Period Surplus / (Deficit)	3,677,147	4,016,540	4,094,492	3,668,265	4,079,463	4,053,813	-	-	-	-	-	-	3,677,147
Assessment	3,239,924	3,239,924	3,239,924	3,239,924	3,239,924	3,239,924	-	-	-	-	-	-	19,439,544
Less Cost	2,900,531	3,161,972	3,666,151	2,828,726	3,265,574	2,856,971	-	-	-	-	-	-	18,679,925
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	339,393	77,952	(426,227)	411,198	(25,650)	382,953	-	-	-	-	-	-	759,619
Ending Surplus / (Deficit)	4,016,540	4,094,492	3,668,265	4,079,463	4,053,813	4,436,766	-	-	-	-	-	-	4,436,766

### Unfunded Deductible and Coinsurance Subsidy

Prior Period Surplus / (Deficit)	(1,100,223)	(1,181,847)	(1,281,314)	(1,372,808)	(1,462,280)	(453,183)	-	-	-	-	-	-	(1,100,223)
Monthly Change	(81,624)	(99,467)	(91,494)	(89,472)	(91,126)	(89,843)	-	-	-	-	-	-	(543,026)
Ending Surplus / (Deficit)	(1,181,847)	(1,281,314)	(1,372,808)	(1,462,280)	(1,553,406)	(543,026)	-	-	-	-	-	-	(1,643,249)

Total HIRSP Retained Earnings	10,250,819	10,096,497	9,071,297	10,575,090	10,777,847	13,143,508	-	-	-	-	-	-	12,043,285
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Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan

December 31, 2005

Fiscal Year 2006

Unaudited Balance Sheet

Assets	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Cash and Cash Equivalents	44,046,067	41,252,806	48,788,689	52,183,513	44,817,788	51,859,495	-	-	-	-	-	-
Other Receivables <sup>(2)</sup>	629,508	448,884	767,911	486,161	466,808	543,408	-	-	-	-	-	-
Drug Rebates Receivable	1,816,840	1,652,849	1,894,871	2,136,068	2,309,997	2,242,298	-	-	-	-	-	-
Assessments Receivable	38,902,416	30,923,047	27,539,749	20,117,978	17,635,540	17,392,438	-	-	-	-	-	-
Prepaid Items	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total Assets</b>	<b>85,394,831</b>	<b>74,277,586</b>	<b>78,991,220</b>	<b>74,923,720</b>	<b>65,230,133</b>	<b>72,037,639</b>	-	-	-	-	-	-
Liabilities and Fund Equity												
Liabilities:												
Unpaid Medical Loss Liabilities	20,350,824	19,170,425	20,550,019	19,729,472	19,237,659	20,026,215	-	-	-	-	-	-
Unpaid Prescription Drug Loss Liabilities	2,904,436	2,491,878	2,722,729	2,618,209	852,329	987,845	-	-	-	-	-	-
Unpaid Loss Adjustment Expense	660,000	660,000	660,000	660,000	660,000	660,000	-	-	-	-	-	-
Unearned Premiums	15,112,758	9,058,807	16,354,912	14,868,208	8,809,678	15,500,229	-	-	-	-	-	-
Unearned Assessments	35,639,168	32,403,320	29,163,396	25,923,056	22,683,132	19,443,208	-	-	-	-	-	-
Accounts Payable and Other Accrued Liabilities	476,826	396,659	468,867	549,685	2,209,488	2,276,634	-	-	-	-	-	-
<b>Total Liabilities</b>	<b>75,144,012</b>	<b>64,181,089</b>	<b>69,919,923</b>	<b>64,348,630</b>	<b>54,452,286</b>	<b>58,894,131</b>	-	-	-	-	-	-
Fund Equity:												
Policyholder	10,556,803	11,377,215	11,148,262	12,727,201	13,353,495	14,100,845	-	-	-	-	-	-
Providers	(3,140,677)	(4,093,896)	(4,372,422)	(4,769,294)	(5,076,055)	(4,851,077)	-	-	-	-	-	-
Insurers	4,016,540	4,094,492	3,668,265	4,079,463	4,053,813	4,436,766	-	-	-	-	-	-
Unfunded Deductible and Coinsurance Subsidy	(1,181,847)	(1,281,314)	(1,372,808)	(1,462,280)	(1,553,406)	(543,026)	-	-	-	-	-	-
<b>Total Retained Earnings</b>	<b>10,250,819</b>	<b>10,096,497</b>	<b>9,071,297</b>	<b>10,575,090</b>	<b>10,777,847</b>	<b>13,143,508</b>	-	-	-	-	-	-
<b>Total Liabilities and Fund Equity</b>	<b>85,394,831</b>	<b>74,277,586</b>	<b>78,991,220</b>	<b>74,923,720</b>	<b>65,230,133</b>	<b>72,037,639</b>	-	-	-	-	-	-

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
MONTHLY PROVIDER CONTRIBUTION REPORT  
AS OF DECEMBER 2005 MONTH END (12/27/2005)**

Provider Share Calculation for the Current Month - Claims by Claim Type					
Regular Claims Claim Type	Billed Charges	U&C Percentage	Usual and Customary	Less HIRSP Allowed Charges	Provider Share
Professional	\$ 7,173,866.30	36.0%	\$ 4,594,861.37	\$ 3,170,419.22	\$ 1,424,442.15
Hospital Outpatient	\$ 3,662,492.21	27.5%	\$ 2,656,680.29	\$ 2,311,912.63	\$ 344,767.66
Hospital Inpatient	\$ 4,899,082.52	28.1%	\$ 3,523,665.10	\$ 2,480,320.69	\$ 1,043,344.41
Nursing Home	\$ 29,549.61	23.9%	\$ 22,494.64	\$ 31,191.99	\$ (8,697.35)
Other	\$ 578,527.07	23.9%	\$ 440,403.73	\$ 411,328.60	\$ 29,075.13
Total	\$ 16,343,517.71		\$ 11,238,105.13	\$ 8,405,173.13	\$ 2,832,932.00

Crossover Claims Claim Type	Medicare Allowed Charges	Medicare Paid	HIRSP Paid	HIRSP Deductible/ Coinsurance	Provider Share
Professional	\$ 559,903.97	\$ 396,268.21	\$ 153,429.10	\$ 9,208.02	\$ 998.64
Hospital Outpatient	\$ 349,153.71	\$ 266,657.15	\$ 75,331.09	\$ 4,341.15	\$ 2,824.32
Hospital Inpatient	\$ 1,396,765.09	\$ 1,357,575.97	\$ 38,701.27	\$ 487.85	\$ 0.00
Nursing Home	\$ 47,615.21	\$ 27,829.67	\$ 19,542.61	\$ -	\$ 242.93
Other	\$ 122,369.54	\$ 85,865.58	\$ 33,811.44	\$ 2,982.31	\$ (289.79)
Total	\$ 2,475,807.52	\$ 2,134,196.58	\$ 320,815.51	\$ 17,019.33	\$ 3,776.10

Provider Contribution on the Increase (Decrease) in Unpaid Losses	\$ 245,241.00
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Total Provider Contribution Non-Pharmacy	\$ 3,081,949.10
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Pharmacy Claims Claim Type	Billed Charges	U&C Percentage	Usual and Customary	Less HIRSP Allowed Charges	Provider Share
Prescription Drug not processed by PBM	\$ -	0.0%			\$ -
Prescription Drug processed by PBM	\$ 6,481,880.87	0.0%	\$ 4,691,006.51	\$ 4,691,006.51	\$ -
Total Provider Contribution Pharmacy	\$ 6,481,880.87		\$ 4,691,006.51	\$ 4,691,006.51	\$ -

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan  
for the Period Ended December 31, 2005  
Calendar Year 2005**

**Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings**

<b>Operating Revenues</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Sep</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Year to Date</b>
Gross Premiums	8,239,786	8,033,854	8,203,838	8,038,869	7,720,822	8,114,062	8,889,521	9,430,635	9,919,154	9,208,729	9,566,310	9,565,274	104,930,854
Premium Subsidized	(354,700)	(328,871)	(306,815)	(348,067)	(353,231)	(352,175)	(414,793)	(418,017)	(414,408)	(421,805)	(419,263)	(419,069)	(4,551,214)
Net Premium Revenues	7,885,086	7,704,983	7,897,023	7,690,802	7,367,591	7,761,887	8,474,728	9,012,618	9,504,746	8,786,924	9,147,047	9,146,205	100,379,640
Provider Contribution	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	2,478,376	2,208,753	3,387,625	2,431,855	2,958,814	3,081,949	32,438,171
Insurer Assessments	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	3,239,924	3,239,924	3,239,924	3,239,924	3,239,924	3,239,924	35,737,638
<b>Total Operating Revenues</b>	<b>12,856,478</b>	<b>12,758,399</b>	<b>12,985,593</b>	<b>13,412,979</b>	<b>13,164,124</b>	<b>13,318,692</b>	<b>14,193,028</b>	<b>14,461,295</b>	<b>16,132,295</b>	<b>14,458,703</b>	<b>15,345,785</b>	<b>15,468,078</b>	<b>168,555,449</b>
<b>Operating Expenses</b>													
Medical Losses:													
Losses Paid or Approved for Payment <sup>(3)</sup>	8,738,080	8,587,330	6,994,408	5,477,768	10,674,619	14,219,985	8,968,093	12,415,734	10,649,147	10,001,181	11,397,611	10,269,160	118,393,116
Increase (Decrease) in Unpaid Losses	(1,174,533)	(984,629)	2,012,472	4,796,581	(459,178)	(1,928,757)	346,665	(1,528,617)	1,786,574	(1,062,608)	(637,881)	1,033,797	2,199,886
Deductible Subsidy Paid	59,708	78,706	29,706	53,990	95,684	78,118	48,493	56,126	47,288	40,031	38,242	29,839	655,931
Total Medical Losses	7,623,255	7,681,407	9,036,586	10,328,339	10,311,125	12,369,346	9,363,251	10,943,243	12,483,009	8,978,604	10,797,972	11,332,796	121,248,933
Pharmacy Losses:													
Losses Paid or Approved for Payment	3,656,006	3,495,680	5,402,192	4,013,268	3,757,404	4,167,950	3,648,421	4,235,825	4,011,497	3,899,125	4,255,524	4,070,543	48,613,435
Increase (Decrease) in Unpaid Losses	(178,275)	116,814	(1,607,836)	139,289	154,789	34,714	79,933	(799,220)	422,513	(99,752)	(45,047)	135,516	(1,646,562)
Drug Rebates	(122,005)	(120,325)	(230,445)	(214,496)	(234,320)	(242,166)	(230,293)	(251,764)	(242,022)	(249,006)	(288,081)	(440,124)	(2,865,047)
Subsidy - Coinsurance Out-of-Pocket Max	12,515	12,515	(8,892)	12,663	22,609	30,369	33,131	43,341	44,206	49,441	52,884	60,004	364,786
Total Pharmacy Losses	3,368,241	3,504,684	3,555,019	3,950,724	3,700,482	3,990,867	3,531,192	3,228,182	4,236,194	3,599,808	3,975,280	3,825,939	44,466,612
Total Losses	10,991,496	11,186,091	12,591,605	14,279,063	14,011,607	16,360,213	12,894,443	14,171,425	16,719,203	12,578,412	14,773,252	15,158,735	165,715,545
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
WPS Admin Fees	-	-	-	380,950	390,487	593,501	402,149	403,846	400,577	389,371	387,094	431,826	3,779,801
Navitus Admin Fees	-	-	-	103,263	105,375	106,618	107,223	107,228	104,720	104,863	104,110	104,209	947,609
DHFS Admin Fees	23,186	37,147	50,352	18,876	50,258	80,383	38,244	22,953	33,719	18,191	14,443	47,633	435,385
EDS Admin Fees	76,867	75,812	74,950	(182)	6,974	-	-	-	-	-	(2,333)	-	232,088
UGS Admin Fees	239,028	241,709	244,304	-	12,500	250	-	-	-	-	-	-	737,791
Milliman USA Actuarial Services	22,888	54,942	25,797	35,041	29,084	19,242	18,329	14,088	8,747	4,514	11,285	9,105	253,062
Other Admin Fees	18,597	12,287	26,803	3,570	5,810	5,567	-	8,000	2,500	2,500	2,825	2,825	88,459
Total Administrative Expenses	380,566	421,897	422,206	541,518	600,488	805,561	565,945	548,115	555,763	519,439	517,099	595,598	6,474,195
Referral fees	7,035	4,607	7,455	9,380	4,725	(665)	5,390	8,610	6,125	7,735	5,705	4,865	70,967
Total Operating Expenses	11,379,097	11,612,595	13,021,266	14,829,961	14,616,820	17,165,109	13,465,778	14,728,150	17,281,091	13,105,586	15,296,056	15,759,198	172,260,707
<b>Net Operating Income (Loss)</b>	<b>1,477,381</b>	<b>1,145,804</b>	<b>(35,673)</b>	<b>(1,416,982)</b>	<b>(1,452,696)</b>	<b>(3,846,417)</b>	<b>727,250</b>	<b>(266,855)</b>	<b>(1,148,796)</b>	<b>1,353,117</b>	<b>49,729</b>	<b>(291,120)</b>	<b>(3,705,258)</b>
<b>Non-Operating Revenues (Expenses)</b>													
Federal Grant	-	-	-	-	-	-	-	-	-	-	-	2,500,578	2,500,578
Investment income	79,968	67,563	92,323	118,962	125,449	104,607	122,541	112,533	123,596	150,676	153,028	156,203	1,407,449
Total Non-operating Revenues (Expenses)	79,968	67,563	92,323	118,962	125,449	104,607	122,541	112,533	123,596	150,676	153,028	2,656,781	3,908,027
<b>Net Income (Loss)</b>	<b>1,557,349</b>	<b>1,213,367</b>	<b>56,650</b>	<b>(1,298,020)</b>	<b>(1,327,247)</b>	<b>(3,741,810)</b>	<b>849,791</b>	<b>(154,322)</b>	<b>(1,025,200)</b>	<b>1,503,793</b>	<b>202,757</b>	<b>2,365,661</b>	<b>202,769</b>
<b>Additions to Retained Earnings</b>													
<b>Policyholder</b>													
Retained Earnings, Beginning of Period	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	11,377,215	11,148,262	12,727,201	13,353,495	9,648,674
Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	(1,100,223)	(1,100,223)
Current Earnings	1,575,865	1,252,788	479,775	(681,086)	(784,731)	(1,948,660)	1,014,178	820,412	(228,953)	1,578,939	626,294	1,847,573	5,552,394
<b>Retained Earnings, End of Period<sup>(1)</sup></b>	<b>11,224,539</b>	<b>12,477,327</b>	<b>12,957,102</b>	<b>12,276,016</b>	<b>11,491,285</b>	<b>9,542,625</b>	<b>10,556,803</b>	<b>11,377,215</b>	<b>11,148,262</b>	<b>12,727,201</b>	<b>13,353,495</b>	<b>14,100,845</b>	<b>14,100,845</b>
<b>Providers</b>													
Retained Earnings, Beginning of Period	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	(4,093,896)	(4,372,422)	(4,769,294)	(5,076,055)	(1,036,887)
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(203,800)	(163,741)	(373,220)	(130,401)	(30,194)	(780,278)	(422,156)	(953,219)	(278,526)	(396,872)	(306,761)	224,978	(3,814,190)
<b>Retained Earnings, End of Period</b>	<b>(1,240,687)</b>	<b>(1,404,428)</b>	<b>(1,777,648)</b>	<b>(1,908,049)</b>	<b>(1,938,243)</b>	<b>(2,718,521)</b>	<b>(3,140,677)</b>	<b>(4,093,896)</b>	<b>(4,372,422)</b>	<b>(4,769,294)</b>	<b>(5,076,055)</b>	<b>(4,851,077)</b>	<b>(4,851,077)</b>
<b>Insurers</b>													
Retained Earnings, Beginning of Period	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	4,094,492	3,668,265	4,079,463	4,053,813	4,951,484
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	257,507	215,541	(29,091)	(419,880)	(394,029)	(904,385)	339,393	77,952	(426,227)	411,198	(25,650)	382,953	(514,718)
<b>Retained Earnings, End of Period</b>	<b>5,208,991</b>	<b>5,424,532</b>	<b>5,395,441</b>	<b>4,975,561</b>	<b>4,581,532</b>	<b>3,677,147</b>	<b>4,016,540</b>	<b>4,094,492</b>	<b>3,668,265</b>	<b>4,079,463</b>	<b>4,053,813</b>	<b>4,436,766</b>	<b>4,436,766</b>
<b>Unfunded Deductible and Coinsurance Subsidy</b>													
Retained Earnings, Beginning of Period	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	(1,281,314)	(1,372,808)	(1,462,280)	(453,183)	477,691
Current Earnings	(72,223)	(91,221)	(20,814)	(66,653)	(118,293)	(108,487)	(81,624)	(99,467)	(91,494)	(89,472)	(91,126)	(89,843)	(1,020,717)
<b>Retained Earnings, End of Period</b>	<b>(694,755)</b>	<b>(785,976)</b>	<b>(806,790)</b>	<b>(873,443)</b>	<b>(991,736)</b>	<b>(1,100,223)</b>	<b>(1,181,847)</b>	<b>(1,281,314)</b>	<b>(1,372,808)</b>	<b>(1,462,280)</b>	<b>(1,553,406)</b>	<b>(543,026)</b>	<b>(543,026)</b>
<b>Total Retained Earnings</b>	<b>14,498,088</b>	<b>15,711,455</b>	<b>15,768,105</b>	<b>14,470,085</b>	<b>13,142,838</b>	<b>9,401,028</b>	<b>10,250,819</b>	<b>10,096,497</b>	<b>9,071,297</b>	<b>10,575,090</b>	<b>10,777,847</b>	<b>13,143,508</b>	<b>13,143,508</b>

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**  
**2005 CALENDAR YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSES**  
**AS OF DECEMBER 2005**

MISC REVENUE	JAN 05	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
<b>TOTAL MISC REVENUE</b>	-	-	-	-	-	-	-	-	-	-	-	-	-

MISC ADMIN EXP	JAN 05	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YEAR TO DATE TOTAL
Bank Service Charge													-
Postage	16,896.89	10,586.78	25,102.79										52,586.46
LAB Audit Fee	1,700.00	1,700.00	1,700.00	2,900.00	5,800.00				7,500.00	2,500.00	2,500.00	2,500.00	28,800.00
Speed Scribe													-
UW Extension													-
NASCHIP									500.00				500.00
Legal Services													-
Prest & Assoc-Ind Med Review													-
Independent Review				600.00								325.00	925.00
Premium Refund Overdraft Fees				70.00	10.00								80.00
Whyte Hirschboeck Dudek, SC						5,567.08							5,567.08
													-
													-
													-
													-
<b>TOTAL MISC ADMIN EXP</b>	<b>18,596.89</b>	<b>12,286.78</b>	<b>26,802.79</b>	<b>3,570.00</b>	<b>5,810.00</b>	<b>5,567.08</b>	<b>-</b>	<b>-</b>	<b>8,000.00</b>	<b>2,500.00</b>	<b>2,500.00</b>	<b>2,825.00</b>	<b>88,458.54</b>

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan  
Calendar Year 2005 Interim Reconciliation  
As Of December 31, 2005**

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
<b>1. Operating and Administrative Costs under s.149.143(1)</b>													
Medical Losses Paid or Approved for Payment	8,738,080	8,587,330	6,994,408	5,477,768	10,674,619	14,219,985	8,968,093	12,415,734	10,649,147	10,001,181	11,397,611	10,269,160	118,393,116
Increase (Decrease) in Unpaid Medical Losses	(1,174,533)	(984,629)	2,012,472	4,796,581	(459,178)	(1,928,757)	346,665	(1,528,617)	1,786,574	(1,062,608)	(637,881)	1,033,797	2,199,886
Pharmacy Losses Paid or Approved for Payment	3,656,006	3,495,680	5,402,192	4,013,268	3,757,404	4,167,950	3,648,421	4,235,825	4,011,497	3,899,125	4,255,524	4,070,543	48,613,435
Increase (Decrease) in Unpaid Pharmacy Losses	(178,275)	116,814	(1,607,836)	139,289	154,789	34,714	79,933	(799,220)	422,513	(99,752)	(45,047)	135,516	(1,646,562)
Drug Rebates	(122,005)	(120,325)	(230,445)	(214,496)	(234,320)	(242,166)	(230,293)	(251,764)	(242,022)	(249,006)	(288,081)	(440,124)	(2,865,047)
Total Administrative Expenses	387,601	426,504	429,661	550,898	605,213	804,896	571,335	556,725	561,888	527,174	522,804	600,463	6,545,162
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	11,306,874	11,521,374	13,000,452	14,763,308	14,498,527	17,056,622	13,384,154	14,628,683	17,189,597	13,016,114	15,204,930	15,669,355	171,239,990
<b>2. Adjustments to Operating and Administrative Costs</b>													
Total Non-operating Revenue (Expense)	79,968	67,563	92,323	118,962	125,449	104,607	122,541	112,533	123,596	150,676	153,028	2,656,781	3,908,027
<b>3. Total Fiscal Year Program Costs to be Split 60% 20% 20%</b>	11,226,906	11,453,811	12,908,129	14,644,346	14,373,078	16,952,015	13,261,613	14,516,150	17,066,001	12,865,438	15,051,902	13,012,574	167,331,963
<b>4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)</b>													
Funding Shares													
60% Policyholders	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	7,956,967	8,709,690	10,239,601	7,719,262	9,031,142	7,807,544	100,399,177
20% Providers	2,245,381	2,290,762	2,581,626	2,928,869	2,874,616	3,390,403	2,652,323	2,903,230	3,413,200	2,573,088	3,010,380	2,602,515	33,466,393
20% Insurers	2,245,381	2,290,762	2,581,626	2,928,869	2,874,616	3,390,403	2,652,323	2,903,230	3,413,200	2,573,088	3,010,380	2,602,515	33,466,393
<b>5. Subsidy Funding Shares</b>													
Premium subsidies	354,700	328,871	306,815	348,067	353,231	352,175	414,793	418,017	414,408	421,805	419,263	419,069	4,551,214
Deductible Subsidies	59,708	78,706	29,706	53,990	95,684	78,118	48,493	56,126	47,288	40,031	38,242	29,839	655,931
Subsidy - coinsurance out-of-pocket Max	12,515	12,515	(8,892)	12,663	22,609	30,369	33,131	43,341	44,206	49,441	52,884	60,004	364,786
Total Subsidies	426,923	420,092	327,629	414,720	471,524	460,662	496,417	517,484	505,902	511,277	510,389	508,912	5,571,931
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	213,462	210,046	163,815	207,360	235,762	230,331	248,209	258,742	252,951	255,639	255,195	254,456	2,785,968
Insurers	213,461	210,046	163,814	207,360	235,762	230,331	248,208	258,742	252,951	255,638	255,194	254,456	2,785,963
<b>6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)</b>													
Policyholders	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	7,956,967	8,709,690	10,239,601	7,719,262	9,031,142	7,807,544	100,399,177
Providers	2,458,843	2,500,808	2,745,441	3,136,229	3,110,378	3,620,734	2,900,532	3,161,972	3,666,151	2,828,727	3,265,575	2,856,971	36,252,361
Insurers	2,458,842	2,500,808	2,745,440	3,136,229	3,110,378	3,620,734	2,900,531	3,161,972	3,666,151	2,828,726	3,265,574	2,856,971	36,252,356
<b>7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)</b>													
Policyholders													
Premium	7,885,086	7,704,983	7,897,023	7,690,802	7,367,591	7,761,887	8,474,728	9,012,618	9,504,746	8,786,924	9,147,047	9,146,205	100,379,640
Premium and Deductible Subsidies Credited to Policyholders	426,923	420,092	327,629	414,720	471,524	460,662	496,417	517,484	505,902	511,277	510,389	508,912	5,571,931
Subtotal	8,312,009	8,125,075	8,224,652	8,105,522	7,839,115	8,222,549	8,971,145	9,530,102	10,010,648	9,298,201	9,657,436	9,655,117	105,951,571
Providers	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	2,478,376	2,208,753	3,387,625	2,431,855	2,958,814	3,081,949	32,438,171
Insurers	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	3,239,924	3,239,924	3,239,924	3,239,924	3,239,924	3,239,924	35,737,638
Total	13,283,401	13,178,491	13,313,222	13,827,699	13,635,648	13,779,354	14,689,445	14,978,779	16,638,197	14,969,980	15,856,174	15,976,990	174,127,380

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

## 8. Interim Estimate of Surplus/(Deficit) Account Balance for FY 2005

<b>Policyholders</b>													
Prior Period Surplus / (Deficit)	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	11,377,215	11,148,262	12,727,201	13,353,495	9,648,674
Premium (Including Premium and Deductible Subsidies)	8,312,009	8,125,075	8,224,652	8,105,522	7,839,115	8,222,549	8,971,145	9,530,102	10,010,648	9,298,201	9,657,436	9,655,117	105,951,571
Less Cost	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	7,956,967	8,709,690	10,239,601	7,719,262	9,031,142	7,807,544	100,399,177
Less Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	1,100,223	1,100,223
Monthly Change	1,575,865	1,252,788	479,775	(681,086)	(784,731)	(1,948,660)	1,014,178	820,412	(228,953)	1,578,939	626,294	747,350	4,452,171
Ending Surplus / (Deficit)	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	11,377,215	11,148,262	12,727,201	13,353,495	14,100,845	14,100,845
Assigned Surplus to SFY 2005	-	-	-	-	-	-	-	-	-	-	-	-	-
Unassigned Surplus	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	11,377,215	11,148,262	12,727,201	13,353,495	14,100,845	14,100,845
<b>Providers</b>													
Prior Period Surplus / (Deficit)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	(4,093,896)	(4,372,422)	(4,769,294)	(5,076,055)	(1,036,887)
Contribution	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	2,478,376	2,208,753	3,387,625	2,431,855	2,958,814	3,081,949	32,438,171
Less Cost	2,458,843	2,500,808	2,745,441	3,136,229	3,110,378	3,620,734	2,900,532	3,161,972	3,666,151	2,828,727	3,265,575	2,856,971	36,252,361
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(203,800)	(163,741)	(373,220)	(130,401)	(30,194)	(780,278)	(422,156)	(953,219)	(278,526)	(396,872)	(306,761)	224,978	(3,814,190)
Ending Surplus / (Deficit)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	(4,093,896)	(4,372,422)	(4,769,294)	(5,076,055)	(4,851,077)	(4,851,077)
<b>Insurers</b>													
Prior Period Surplus / (Deficit)	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	4,094,492	3,668,265	4,079,463	4,053,813	4,951,484
Assessment	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	3,239,924	3,239,924	3,239,924	3,239,924	3,239,924	3,239,924	35,737,638
Less Cost	2,458,842	2,500,808	2,745,440	3,136,229	3,110,378	3,620,734	2,900,531	3,161,972	3,666,151	2,828,726	3,265,574	2,856,971	36,252,356
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	257,507	215,541	(29,091)	(419,880)	(394,029)	(904,385)	339,393	77,952	(426,227)	411,198	(25,650)	382,953	(514,718)
Ending Surplus / (Deficit)	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	4,094,492	3,668,265	4,079,463	4,053,813	4,436,766	4,436,766
<b>Unfunded Deductible and Coinsurance Subsidy</b>													
Prior Period Surplus / (Deficit)	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	(1,281,314)	(1,372,808)	(1,462,280)	(453,183)	(622,532)
Monthly Change	(72,223)	(91,221)	(20,814)	(66,653)	(118,293)	(108,487)	(81,624)	(99,467)	(91,494)	(89,472)	(91,126)	(89,843)	(1,020,717)
Ending Surplus / (Deficit)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	(1,281,314)	(1,372,808)	(1,462,280)	(1,553,406)	(543,026)	(1,643,249)
Total HIRSP Retained Earnings	14,498,088	15,711,455	15,768,105	14,470,085	13,142,838	9,401,028	10,250,819	10,096,497	9,071,297	10,575,090	10,777,847	13,143,508	12,043,285

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.



**Wisconsin Health Insurance Risk Sharing Plan**

December 31, 2005

Calendar Year 2005

**Unaudited Balance Sheet**

<b>Assets</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Sep</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>
Cash and Cash Equivalents	43,348,568	47,057,865	53,789,890	57,009,607	48,034,750	47,991,033	44,046,067	41,252,806	48,788,689	52,183,513	44,817,788	51,859,495
Other Receivables <sup>(2)</sup>	96,643	125,560	94,016	1,742,701	1,472,644	1,234,188	629,508	448,884	767,911	486,161	466,808	543,408
Drug Rebates Receivable	1,246,751	1,051,895	1,282,340	1,496,835	1,344,382	1,586,548	1,816,840	1,652,849	1,894,871	2,136,068	2,309,997	2,242,298
Assessments Receivable	3,357,262	94,485	217,131	97,932	85,013	85,013	38,902,416	30,923,047	27,539,749	20,117,978	17,635,540	17,392,438
Prepaid Items	52,878	42,291	17,188	1,280	-	-	-	-	-	-	-	-
<b>Total Assets</b>	<b>48,102,102</b>	<b>48,372,096</b>	<b>55,400,565</b>	<b>60,348,355</b>	<b>50,936,789</b>	<b>50,896,782</b>	<b>85,394,831</b>	<b>74,277,586</b>	<b>78,991,220</b>	<b>74,923,720</b>	<b>65,230,133</b>	<b>72,037,639</b>
<b>Liabilities and Fund Equity</b>												
Liabilities:												
Unpaid Medical loss Liabilities	17,498,548	16,751,485	18,285,381	21,908,176	21,560,577	20,085,992	20,350,824	19,170,425	20,550,019	19,729,472	19,237,659	20,026,215
Unpaid Prescription Drug Loss Liabilities	2,456,132	2,572,946	965,110	2,584,048	2,863,469	3,033,333	2,904,436	2,491,878	2,722,729	2,618,209	852,329	987,845
Unpaid Loss Adjustment Expense	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000
Unearned Premiums	12,599,991	7,023,489	16,764,621	14,630,761	9,063,254	17,186,962	15,112,758	9,058,807	16,354,912	14,868,208	8,809,678	15,500,229
Unearned Assessments	2,260	5,010,790	2,537,883	5,432,699	2,716,349	-	35,639,168	32,403,320	29,163,396	25,923,056	22,683,132	19,443,208
Accounts Payable and Other Accrued Liabilities	387,083	641,931	419,465	662,586	930,302	529,467	476,826	396,659	468,867	549,685	2,209,488	2,276,634
<b>Total Liabilities</b>	<b>33,604,014</b>	<b>32,660,641</b>	<b>39,632,460</b>	<b>45,878,270</b>	<b>37,793,951</b>	<b>41,495,754</b>	<b>75,144,012</b>	<b>64,181,089</b>	<b>69,919,923</b>	<b>64,348,630</b>	<b>54,452,286</b>	<b>58,894,131</b>
Fund Equity:												
Policyholder	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	11,377,215	11,148,262	12,727,201	13,353,495	14,100,845
Providers	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	(4,093,896)	(4,372,422)	(4,769,294)	(5,076,055)	(4,851,077)
Insurers	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	4,094,492	3,668,265	4,079,463	4,053,813	4,436,766
Unfunded Deductible and Coinsurance Subsidy	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	(1,281,314)	(1,372,808)	(1,462,280)	(1,553,406)	(543,026)
<b>Total Retained Earnings</b>	<b>14,498,088</b>	<b>15,711,455</b>	<b>15,768,105</b>	<b>14,470,085</b>	<b>13,142,838</b>	<b>9,401,028</b>	<b>10,250,819</b>	<b>10,096,497</b>	<b>9,071,297</b>	<b>10,575,090</b>	<b>10,777,847</b>	<b>13,143,508</b>
<b>Total Liabilities and Fund Equity</b>	<b>48,102,102</b>	<b>48,372,096</b>	<b>55,400,565</b>	<b>60,348,355</b>	<b>50,936,789</b>	<b>50,896,782</b>	<b>85,394,831</b>	<b>74,277,586</b>	<b>78,991,220</b>	<b>74,923,720</b>	<b>65,230,133</b>	<b>72,037,639</b>

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**

**EARNED PREMIUM**

**FISCAL YEAR 2006**

EARNED PREMIUM	
MONTH	FY 06
JUL	8,474,728
AUG	9,012,618
SEP	9,504,746
OCT	8,786,924
NOV	9,147,047
DEC	9,146,205
JAN	
FEB	
MAR	
APR	
MAY	
JUN	
TOTAL	\$ 54,072,268

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# Wisconsin Health Insurance Risk Sharing Plan

## Assessment Status

As of December 31, 2005

**Prior Fiscal Assessments Receivable Balance:** \$ 19.63

**Fiscal Year 2006 Assessment Amount:** \$ 38,883,169.06

Less: Payments Received

2005 07 0.00

2005 08 (7,983,385.56)

2005 09 (3,360,556.48)

2005 10 (7,421,282.02)

2005 11 (2,482,438.20)

2005 12 (243,087.94)

Current Year Total \$ 17,392,418.86

**Total Assessments Receivable Balance:** \$ 17,392,438.49

Effective July 1, 2005, the assessment billing practice has changed to bill insurers for the full fiscal year assessment at the start of HIRSP's fiscal year. Insurers may elect to pay in full or multiple installments, as in years past. This schedule now reflects this billing change.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## *Monthly Applicant Activity For December 2005*

Number of Applications Pending	November	429
Number of Applications Received	December	494
Number of Applications Rejected	December	10
Number of Applications Closed	December	53
Number of Applications Pending	December	182
Number of Applications Approved	December	376

### **Detail of Applications Rejected**

Eligible for Group Health Coverage	3
Current Medicaid Coverage	0
Not a Wisconsin Resident	0
Did not Qualify for lost Employer Coverage	2
65 or Older	0
Previous HIRSP < 12 Months Ago	0
Currently Covered by Other Insurance	1
No Medical Reason	1
Insufficient Premium Submitted	0
Total	7

### **Detail of Applications Closed**

Applicant Request	8
Proper Eligibility Requested, never received	44
Application Data Requested, never received	1
Total	53

These numbers have been restated as of 1/28/06. The original report contained overstated pending application numbers due to an error in programming

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Monthly Applicant Activity

December, 2005

A.	Medicare Eligible	1
B.	HIV +	2
C.	Eligible Individual	204
D.	Letter of Medical Eligibility	156
1.	Letter of Rejection By:	
	American Family	14
	American Medical Security Group	3
	American Republic	3
	Assurant Health	12
	Blue Cross & Blue Shield United of Wisconsin	41
	Continental General Insurance Company	1
	Dean Health Plan	1
	Fortis Benefits Insurance	3
	Golden Rule Insurance Company	8
	Humana Insurance Company	17
	Mega Life and Health Insurance	9
	Mid-West National Life Insurance Company of	3
	Security Health Plan	14
	Unity Health Plan	2
	Wisconsin Physicians Service Insurance	13
	World Insurance	2
2.	Notice of Benefit Reduction	7
3.	Notice of Premium increase due to a Health Reason	4
Total		363

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**

**Restated Monthly Enrollment Through December 2005 Month End**

	Total Subsidy				Total Non-Subsidy					Combined Total			
	Plan 1A	Plan 2	Total		Plan 1A	Plan 1B	Plan 2	Total		Plan 1A	Plan 1B	Plan 2	Total
January-05	2,960	743	3,703		4,713	9,133	955	14,801		7,673	9,133	1,698	18,504
February-05	2,956	741	3,697		4,755	9,225	961	14,941		7,711	9,225	1,702	18,638
March-05	2,967	739	3,706		4,825	9,357	960	15,142		7,792	9,357	1,699	18,848
April-05	2,955	742	3,697		4,814	9,364	963	15,141		7,769	9,364	1,705	18,838
May-05	2,958	737	3,695		4,873	9,475	963	15,311		7,831	9,475	1,700	19,006
June-05	2,976	738	3,714		4,937	9,630	975	15,542		7,913	9,630	1,713	19,256
July-05	2,712	709	3,421		5,039	9,535	1,003	15,577		7,751	9,535	1,712	18,998
August-05	2,741	702	3,443		5,014	9,614	989	15,617		7,755	9,614	1,691	19,060
September-05	2,747	696	3,443		4,964	9,637	963	15,564		7,711	9,637	1,659	19,007
October-05	2,802	685	3,487		4,849	9,609	925	15,383		7,651	9,609	1,610	18,870
November-05	2,804	681	3,485		4,846	9,657	906	15,409		7,650	9,657	1,587	18,894
December-05	2,819	675	3,494		4,838	9,720	895	15,453		7,657	9,720	1,570	18,947

**Detail of Total Subsidy Policies in Force as of December 2005 Month End**

	Level 0	Level 1	Level 2	Level 3	Level 4	Level 5	Total
January-05	14,801	529	526	676	1,451	521	18,504
February-05	14,941	520	523	678	1,461	515	18,638
March-05	15,142	519	523	682	1,471	511	18,848
April-05	15,141	516	516	687	1,477	501	18,838
May-05	15,311	516	511	686	1,482	500	19,006
June-05	15,542	515	513	692	1,494	500	19,256
July-05	15,577	433	475	657	1,362	494	18,998
August-05	15,617	434	477	656	1,381	495	19,060
September-05	15,564	433	476	650	1,393	491	19,007
October-05	15,383	431	480	652	1,431	493	18,870
November-05	15,409	425	481	652	1,438	489	18,894
December-05	15,453	428	477	656	1,446	487	18,947

Level 0 = Income > \$25,000

Level 1 = Income \$17,000-\$19,999

Level 2 = Income \$14,000-\$16,999

Level 3 = Income \$10,000-\$13,999

Level 4 = Income < or equal to \$9,999

Level 5 = Income \$20,000-\$24,999

**\* Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

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# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Total Policies in Force by Plan, Gender and Age Group as of December 2005 Month End

### Male

Plan	Gender	Age Group	Number of Policyholders
1A	Male	0-24	449
1A	Male	25-29	246
1A	Male	30-34	177
1A	Male	35-39	241
1A	Male	40-44	406
1A	Male	45-49	493
1A	Male	50-54	532
1A	Male	55-59	469
1A	Male	60-64	430
1A	Male	65+	5
Total			3,448

### Female

Plan	Gender	Age Group	Number of Policyholders
1A	Female	0-24	399
1A	Female	25-29	223
1A	Female	30-34	207
1A	Female	35-39	241
1A	Female	40-44	321
1A	Female	45-49	466
1A	Female	50-54	586
1A	Female	55-59	777
1A	Female	60-64	977
1A	Female	65+	12
Total			4,209

Plan	Gender	Age Group	Number of Policyholders
1B	Male	0-24	299
1B	Male	25-29	78
1B	Male	30-34	78
1B	Male	35-39	174
1B	Male	40-44	320
1B	Male	45-49	490
1B	Male	50-54	692
1B	Male	55-59	919
1B	Male	60-64	1,343
1B	Male	65+	12
Total			4,405

Plan	Gender	Age Group	Number of Policyholders
1B	Female	0-24	194
1B	Female	25-29	56
1B	Female	30-34	82
1B	Female	35-39	166
1B	Female	40-44	293
1B	Female	45-49	493
1B	Female	50-54	722
1B	Female	55-59	1,209
1B	Female	60-64	2,082
1B	Female	65+	18
Total			5,315

Plan	Gender	Age Group	Number of Policyholders
2	Male	0-24	3
2	Male	25-29	10
2	Male	30-34	13
2	Male	35-39	31
2	Male	40-44	68
2	Male	45-49	98
2	Male	50-54	119
2	Male	55-59	104
2	Male	60-64	84
2	Male	65+	112
Total			642

Plan	Gender	Age Group	Number of Policyholders
2	Female	0-24	3
2	Female	25-29	3
2	Female	30-34	19
2	Female	35-39	28
2	Female	40-44	59
2	Female	45-49	98
2	Female	50-54	121
2	Female	55-59	150
2	Female	60-64	154
2	Female	65+	293
Total			928

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# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Total Policies in Force by Plan, Gender, Zone and Age Group as of December 2005 Month End

### Male

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	1	Male	0-24	29
1A	1	Male	25-29	18
1A	1	Male	30-34	16
1A	1	Male	35-39	33
1A	1	Male	40-44	38
1A	1	Male	45-49	49
1A	1	Male	50-54	41
1A	1	Male	55-59	37
1A	1	Male	60-64	27
1A	1	Male	65+	2
Total				290

### Female

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	1	Female	0-24	26
1A	1	Female	25-29	25
1A	1	Female	30-34	25
1A	1	Female	35-39	15
1A	1	Female	40-44	27
1A	1	Female	45-49	34
1A	1	Female	50-54	46
1A	1	Female	55-59	74
1A	1	Female	60-64	76
1A	1	Female	65+	1
Total				349

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	2	Male	0-24	139
1A	2	Male	25-29	83
1A	2	Male	30-34	64
1A	2	Male	35-39	73
1A	2	Male	40-44	112
1A	2	Male	45-49	141
1A	2	Male	50-54	147
1A	2	Male	55-59	135
1A	2	Male	60-64	109
1A	2	Male	65+	2
Total				1,005

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	2	Female	0-24	139
1A	2	Female	25-29	77
1A	2	Female	30-34	65
1A	2	Female	35-39	82
1A	2	Female	40-44	96
1A	2	Female	45-49	140
1A	2	Female	50-54	176
1A	2	Female	55-59	193
1A	2	Female	60-64	279
1A	2	Female	65+	4
Total				1,251

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	3	Male	0-24	281
1A	3	Male	25-29	145
1A	3	Male	30-34	97
1A	3	Male	35-39	135
1A	3	Male	40-44	256
1A	3	Male	45-49	303
1A	3	Male	50-54	344
1A	3	Male	55-59	297
1A	3	Male	60-64	294
1A	3	Male	65+	1
Total				2,153

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	3	Female	0-24	234
1A	3	Female	25-29	121
1A	3	Female	30-34	117
1A	3	Female	35-39	144
1A	3	Female	40-44	198
1A	3	Female	45-49	292
1A	3	Female	50-54	364
1A	3	Female	55-59	510
1A	3	Female	60-64	622
1A	3	Female	65+	7
Total				2,609

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# **WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**

## **Total Policies in Force by Plan, Gender, Zone and Age Group as of December 2005 Month End**

### **Male**

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	1	Male	0-24	23
1B	1	Male	25-29	8
1B	1	Male	30-34	10
1B	1	Male	35-39	18
1B	1	Male	40-44	30
1B	1	Male	45-49	30
1B	1	Male	50-54	37
1B	1	Male	55-59	61
1B	1	Male	60-64	73
1B	1	Male	65+	1
Total				291

### **Female**

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	1	Female	0-24	14
1B	1	Female	25-29	10
1B	1	Female	30-34	9
1B	1	Female	35-39	5
1B	1	Female	40-44	15
1B	1	Female	45-49	31
1B	1	Female	50-54	37
1B	1	Female	55-59	72
1B	1	Female	60-64	128
1B	1	Female	65+	0
Total				321

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	2	Male	0-24	89
1B	2	Male	25-29	18
1B	2	Male	30-34	31
1B	2	Male	35-39	56
1B	2	Male	40-44	83
1B	2	Male	45-49	146
1B	2	Male	50-54	203
1B	2	Male	55-59	248
1B	2	Male	60-64	368
1B	2	Male	65+	3
Total				1,245

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	2	Female	0-24	71
1B	2	Female	25-29	20
1B	2	Female	30-34	24
1B	2	Female	35-39	65
1B	2	Female	40-44	87
1B	2	Female	45-49	155
1B	2	Female	50-54	234
1B	2	Female	55-59	370
1B	2	Female	60-64	596
1B	2	Female	65+	4
Total				1,626

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	3	Male	0-24	187
1B	3	Male	25-29	52
1B	3	Male	30-34	37
1B	3	Male	35-39	100
1B	3	Male	40-44	207
1B	3	Male	45-49	314
1B	3	Male	50-54	452
1B	3	Male	55-59	610
1B	3	Male	60-64	902
1B	3	Male	65+	8
Total				2,869

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	3	Female	0-24	109
1B	3	Female	25-29	26
1B	3	Female	30-34	49
1B	3	Female	35-39	96
1B	3	Female	40-44	191
1B	3	Female	45-49	307
1B	3	Female	50-54	451
1B	3	Female	55-59	767
1B	3	Female	60-64	1,358
1B	3	Female	65+	14
Total				3,368

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# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Total Policies in Force by Plan, Gender, Zone and Age Group as of December 2005 Month End

### Male

Plan	Zone	Gender	Age Group	Number of Policyholders
2	1	Male	0-24	0
2	1	Male	25-29	1
2	1	Male	30-34	3
2	1	Male	35-39	7
2	1	Male	40-44	9
2	1	Male	45-49	15
2	1	Male	50-54	16
2	1	Male	55-59	15
2	1	Male	60-64	8
2	1	Male	65+	8
Total				82

### Female

Plan	Zone	Gender	Age Group	Number of Policyholders
2	1	Female	0-24	1
2	1	Female	25-29	0
2	1	Female	30-34	4
2	1	Female	35-39	1
2	1	Female	40-44	8
2	1	Female	45-49	8
2	1	Female	50-54	19
2	1	Female	55-59	13
2	1	Female	60-64	10
2	1	Female	65+	25
Total				89

Plan	Zone	Gender	Age Group	Number of Policyholders
2	2	Male	0-24	2
2	2	Male	25-29	2
2	2	Male	30-34	7
2	2	Male	35-39	9
2	2	Male	40-44	21
2	2	Male	45-49	31
2	2	Male	50-54	35
2	2	Male	55-59	20
2	2	Male	60-64	25
2	2	Male	65+	33
Total				185

Plan	Zone	Gender	Age Group	Number of Policyholders
2	2	Female	0-24	1
2	2	Female	25-29	0
2	2	Female	30-34	10
2	2	Female	35-39	11
2	2	Female	40-44	21
2	2	Female	45-49	32
2	2	Female	50-54	37
2	2	Female	55-59	47
2	2	Female	60-64	43
2	2	Female	65+	88
Total				290

Plan	Zone	Gender	Age Group	Number of Policyholders
2	3	Male	0-24	1
2	3	Male	25-29	7
2	3	Male	30-34	3
2	3	Male	35-39	15
2	3	Male	40-44	38
2	3	Male	45-49	52
2	3	Male	50-54	68
2	3	Male	55-59	69
2	3	Male	60-64	51
2	3	Male	65+	71
Total				375

Plan	Zone	Gender	Age Group	Number of Policyholders
2	3	Female	0-24	1
2	3	Female	25-29	3
2	3	Female	30-34	5
2	3	Female	35-39	16
2	3	Female	40-44	30
2	3	Female	45-49	58
2	3	Female	50-54	65
2	3	Female	55-59	90
2	3	Female	60-64	101
2	3	Female	65+	180
Total				549

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# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Total Subsidy/Non-Subsidy as of December 2005 Month End

Plan			Number of Policyholders
1A	Non-subsidized		4,838
1A	Subsidized		2,819
1B	Non-subsidized		9,720
2	Non-subsidized		895
2	Subsidized		675
Total			18,947

## Total Subsidy by Level

Subsidy Level	Number of Policyholders
Level 0	15,453
Level 1	428
Level 2	477
Level 3	656
Level 4	1,446
Level 5	487
Total	18,947

Number of Policyholders	
Plan 1A, Zone 1, Non-Subsidized	349
Plan 1A, Zone 1, Subsidized	290
Plan 1A, Zone 2, Non-Subsidized	1,457
Plan 1A, Zone 2, Subsidized	799
Plan 1A, Zone 3, Non-Subsidized	3,032
Plan 1A, Zone 3, Subsidized	1,730
Plan 1B, Zone 1, Non-Subsidized	612
Plan 1B, Zone 2, Non-Subsidized	2,871
Plan 1B, Zone 3, Non-Subsidized	6,237
Plan 2, Zone 1, Non-Subsidized	79
Plan 2, Zone 1, Subsidized	92
Plan 2, Zone 2, Non-Subsidized	267
Plan 2, Zone 2, Subsidized	208
Plan 2, Zone 3, Non-Subsidized	549
Plan 2, Zone 3, Subsidized	375
Total	18,947

**\* Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

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# Wisconsin Health Insurance Risk Sharing Plan

## Monthly Service Report

For: December, 2005

### Customer Service/Policyholder Services

Week Ending	Calls Offered	Calls Handled	# Abandoned	% Abandoned	Average Wait (ASA)*	Longest Wait	Average Talk	Service Level**
12/2/2005	2,642	2,617	25	0.90%	00:00:27	00:04:32	00:04:08	94.50%
12/9/2005	2,645	2,618	27	1.00%	00:00:27	00:04:07	00:04:00	94.70%
12/16/2005	2,645	2,618	27	1.00%	00:00:27	00:04:07	00:04:00	94.70%
12/23/2005	2,022	2,001	21	1.00%	00:00:23	00:04:11	00:03:47	96.30%
12/30/2005	2,433	2,406	27	1.10%	00:00:23	00:05:52	00:03:42	95.60%

Week Ending	Calls Offered	Calls Handled	# Abandoned	% Abandoned	Average Wait (ASA)*	Longest Wait	Average Talk	Service Level**
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### Historical

01-2005	10,390	9,357	1,015	9.6 %	00:04:09	00:11:24	00:03:35	
02-2005	10,618	9,625	933	8.8 %	00:03:40	00:12:35	00:03:29	
03-2005	13,363	11,782	1,561	11.5 %	00:04:34	00:18:00	00:03:30	
04-2005	18,245	17,962	283	1.6 %	00:00:30	00:09:35	00:03:38	93.00%
05-2005	17,638	17,311	327	1.9 %	00:00:39	00:12:39	00:03:39	89.00%
06-2005	18,966	18,309	657	3.5 %	00:00:57	00:12:07	00:03:48	81.00%
07-2005	12,293	12,150	143	1.2 %	00:00:25	00:07:50	00:04:07	94.00%
08-2005	11,975	11,851	124	1.0 %	00:00:22	00:06:54	00:04:03	96.00%
09-2005	12,065	11,943	122	1.0 %	00:00:20	00:05:26	00:03:54	96.00%
10-2005	11,118	10,962	156	1.4 %	00:00:26	00:09:09	00:04:03	94.00%
11-2005	10,695	10,530	165	1.5 %	00:00:24	00:05:39	00:03:53	95.00%
12-2005	10,808	10,697	111	1.0 %	00:00:25	00:05:52	00:03:55	96.00%

### Medical Affairs Telephone

12/2/2005	201	198	3	1.50%	00:00:31	00:04:29	00:02:39	94.30%
12/9/2005	214	210	4	1.90%	00:00:22	00:01:43	00:02:55	96.70%
12/16/2005	160	154	6	3.80%	00:00:30	00:03:05	00:02:41	93.10%
12/23/2005	164	156	8	4.90%	00:00:38	00:03:03	00:02:35	89.40%
12/30/2005	155	153	2	1.30%	00:00:37	00:03:07	00:03:09	95.00%

### PBM Telephone Results

12/2/2005	181	180	1	0.60%	00:00:01	00:00:48	00:03:46	99.40%
12/9/2005	179	177	2	0.10%	00:00:02	00:01:09	00:03:38	98.90%
12/16/2005	192	190	2	0.10%	00:00:02	00:00:13	00:03:08	100.00%
12/23/2005	194	193	1	0.10%	00:00:03	00:01:08	00:03:33	97.40%
12/30/2005	208	208	0	0.00%	00:00:04	00:01:40	00:04:07	94.20%

All Time Formats are hh:mm:ss Historical Stats prior to April 1, 2005 have all been converted to the new format.

\* ASA = Average Speed of Answer

\*\* Service Level = Calls handled within 120 seconds divided by the number of calls offered.

\*\*\* Monthly totals are based on actual month end which is the last day of the month.

### Most Commonly Asked Questions to Customer Service/ Policyholder Services

- What is the status of my claim?
- What is the status of my application?
- What is my premium?

### Open Written Correspondence

Department	Beginning Inventory	Received	Completed	1 to 2 Days	3 to 5 Days	6+ Days	Ending Inventory
CUSTOMER SERVICE	16	94	97	4	2	9	13
MEDICAL AFFAIRS	0	0	0	0	0	0	0
POLICYHOLDER SERVICES*	11	128	70	55	1	6	69

\* Supplemental application documentation is no longer counted as correspondence.

### First Call Resolution

Number of Calls Handled	First Call Resolved	Percent of Calls
8,797	8,187	93.07%

### Telephone and Written

Number of Days	Number of Inquires	Number Closed	Percentage
5	1685	1659	98.46%
2	1685	1634	96.97%

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**  
**CLAIMS THAT HAVE FINALIZED TO PAYMENT OR DENIAL AS OF DECEMBER 2005 MONTH END (12/27/2005)**

	Dec 2004*	Jan 2005*	Feb 2005*	Mar 2005*	Apr 2005**	May 2005**	June 2005**	July 2005**	Aug 2005**	Sep 2005**	Oct 2005**	Nov 2005**	Dec 2005**
	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims
<b>Plan 1A</b>													
Pharmacy					23,720	27,571	28,761	27,037	29,298	28,184	27,435	29,461	30,034
Inpatient Hospital					71	216	379	228	282	210	182	235	173
Inpatient Hospital Crossovers					2	5	3	2	5	2	3	1	1
Outpatient Hospital					2,240	2,532	2,762	1,980	2,724	2,221	2,212	2,321	2,003
Outpatient Hospital Crossovers					21	43	23	16	16	8	16	15	32
Physician					8,566	16,271	15,154	11,676	14,485	12,807	11,605	13,465	11,515
Physician Crossovers					31	115	100	161	110	80	80	80	60
Nursing Home					13	26	44	13	35	22	22	15	7
Nursing Home Crossovers					0	0	0	0	0	0	0	0	0
Miscellaneous					1,070	3,032	2,826	1,778	2,715	2,450	1,944	2,193	1,879
Miscellaneous Crossovers					4	6	8	46	37	49	6	26	15
Total Plan 1A					35,738	49,817	50,060	42,937	49,707	46,033	43,505	47,812	45,719
<b>Plan 1B</b>													
Pharmacy					20,059	23,142	24,564	23,494	25,910	25,090	24,370	26,359	26,799
Inpatient Hospital					66	169	221	143	240	183	158	166	140
Inpatient Hospital Crossovers					1	3	2	2	2	2	2	3	0
Outpatient Hospital					1,698	1,903	2,174	1,519	2,165	1,750	1,750	1,831	1,674
Outpatient Hospital Crossovers					11	24	34	9	28	14	7	5	13
Physician					6,617	13,114	12,397	9,421	12,091	10,861	9,916	11,838	10,735
Physician Crossovers					63	55	87	67	65	43	25	56	43
Nursing Home					1	11	2	6	10	12	11	9	5
Nursing Home Crossovers					0	0	0	0	0	0	0	0	0
Miscellaneous					717	1,781	1,629	1,112	1,564	1,407	1,047	1,263	1,271
Miscellaneous Crossovers					1	15	15	6	8	8	15	8	2
Total Plan 1B					29,234	40,217	41,125	35,779	42,083	39,370	37,301	41,538	40,682
<b>Plan 2</b>													
Pharmacy					12,083	13,905	14,360	13,737	14,788	14,046	13,246	13,909	14,479
Inpatient Hospital					4	10	17	11	11	8	2	6	13
Inpatient Hospital Crossovers					52	103	94	62	112	81	68	79	57
Outpatient Hospital					155	186	141	149	174	154	78	73	84
Outpatient Hospital Crossovers					771	1,233	1,236	891	1,286	1,243	928	971	959
Physician					311	525	384	416	487	351	266	258	247
Physician Crossovers					3,133	6,487	5,978	5,530	6,979	5,193	5,074	5,676	4,307
Nursing Home					6	6	8	5	9	4	2	7	7
Nursing Home Crossovers					5	18	37	14	42	14	17	33	23
Miscellaneous					252	358	344	278	431	302	271	247	248
Miscellaneous Crossovers					622	1,315	1,417	1,033	1,738	1,675	1,532	1,631	1,260
Total Plan 2					17,394	24,146	24,016	22,126	26,057	23,071	21,484	22,890	21,684
<b>Total</b>													
Pharmacy	63,621	62,372	61,359	63,736	55,862	64,618	67,685	64,268	69,996	67,320	65,051	69,729	71,312
Inpatient Hospital	540	422	462	421	141	395	617	382	533	401	342	407	326
Inpatient Hospital Crossovers	71	73	96	77	55	111	99	66	119	85	73	83	58
Outpatient Hospital	5,705	4,027	4,448	3,164	4,093	4,621	5,077	3,648	5,063	4,125	4,040	4,225	3,761
Outpatient Hospital Crossovers	1,598	1,015	1,211	882	803	1,300	1,293	916	1,330	1,265	951	991	1,004
Physician	32,229	24,762	26,193	18,349	15,494	29,910	27,935	21,513	27,063	24,019	21,787	25,561	22,497
Physician Crossovers	6,286	4,251	4,592	2,977	3,227	6,657	6,165	5,758	7,154	5,316	5,179	5,812	4,410
Nursing Home	14	31	26	29	20	43	54	24	54	38	35	31	19
Nursing Home Crossovers	11	6	4	2	5	18	37	14	42	14	17	33	23
Miscellaneous	2,405	1,817	1,842	1,948	2,039	5,171	4,799	3,168	4,710	4,159	3,262	3,703	3,398
Miscellaneous Crossovers	0	0	0	0	627	1,336	1,440	1,085	1,783	1,732	1,553	1,665	1,277
Total	112,480	98,776	100,233	91,585	82,366	114,180	115,201	100,842	117,847	108,474	102,290	112,240	108,085

\* The reporting of inventory numbers before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

\*\* Adjustments have been reported in the non-Crossover categories on history prior to April 2005. Adjustments are not included in any category beginning with April 2005.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**  
**AVERAGE CLAIMS PROCESSING DAYS AS OF DECEMBER 2005 MONTH END (12/27/2005)**

	Dec 2004* Ave # Days	Jan 2005* Ave # Days	Feb 2005* Ave # Days	Mar 2005* Ave # Days	Apr 2005** Ave # Days	May 2005** Ave # Days	June 2005** Ave # Days	July 2005** Ave # Days	Aug 2005** Ave # Days	Sep 2005** # of Claims	Oct 2005** # of Claims	Nov 2005** # of Claims	Dec 2005** # of Claims
<b>Plan 1A</b>													
Inpatient Hospital					30.04	32.29	26.42	23.66	19.50	18.77	7.28	13.04	17.61
Inpatient Hospital Crossovers					37.00	23.25	21.66	24.00	11.50	0.00	25.00	7.00	6.00
Outpatient Hospital					11.96	10.73	8.44	7.28	6.41	3.31	2.53	2.40	2.91
Outpatient Hospital Crossovers					25.00	23.45	24.68	16.35	12.57	11.28	6.18	6.13	7.21
Professional					20.39	16.04	10.11	9.65	7.19	4.54	3.35	3.12	3.77
Professional Crossovers					23.86	18.75	14.14	12.20	13.76	8.15	7.22	5.17	7.22
Nursing Home					13.88	27.53	14.52	27.28	19.00	15.80	9.00	15.72	10.00
Nursing Home Crossovers					0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Miscellaneous					23.20	21.24	17.48	17.06	12.51	8.12	5.69	5.17	6.17
Miscellaneous Crossovers					36.75	24.60	29.00	22.33	29.16	8.07	8.80	9.23	10.40
Average for the Month for Plan 1A					19.09	16.19	11.02	10.33	7.94	4.92	3.53	3.31	3.98
<b>Plan 1B</b>													
Inpatient Hospital					27.56	29.74	27.46	25.59	19.78	21.26	9.97	9.08	18.44
Inpatient Hospital Crossovers					35.00	19.66	16.00	18.00	10.00	14.00	11.00	5.50	0.00
Outpatient Hospital					12.69	10.35	8.46	8.28	6.32	3.16	2.45	2.25	2.76
Outpatient Hospital Crossovers					27.63	21.20	24.16	19.14	15.25	10.14	6.66	4.80	9.70
Professional					20.50	15.15	9.72	8.99	6.89	4.32	3.09	2.99	3.58
Professional Crossovers					22.80	22.86	14.83	11.94	15.42	9.30	6.39	6.93	5.50
Nursing Home					16.00	37.66	15.00	11.50	10.66	12.20	7.00	7.50	4.00
Nursing Home Crossovers					0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Miscellaneous					23.74	20.84	17.49	18.25	12.51	7.84	5.28	5.01	6.05
Miscellaneous Crossovers					11.00	23.81	14.35	18.00	12.14	9.80	5.16	3.62	1.00
Average for the Month for Plan 1B					19.33	15.29	10.42	9.78	7.48	4.59	3.21	3.06	3.74
<b>Plan 2</b>													
Inpatient Hospital					24.00	68.37	21.77	18.75	15.00	13.33	0.00	0.00	10.00
Inpatient Hospital Crossovers					29.38	19.32	19.72	22.69	15.52	10.25	8.04	6.50	14.50
Outpatient Hospital					19.54	20.59	16.63	21.66	11.52	7.58	7.00	8.60	7.03
Outpatient Hospital Crossovers					25.07	16.97	17.06	17.53	13.24	9.21	5.44	5.54	8.27
Professional					25.29	23.62	21.91	22.17	12.91	8.24	5.72	5.50	6.87
Professional Crossovers					23.33	15.34	13.11	13.54	8.47	6.05	3.87	3.47	4.41
Nursing Home					21.33	18.80	18.50	0.00	12.60	16.66	14.00	5.25	8.25
Nursing Home Crossovers					22.60	14.33	19.00	24.66	18.89	11.60	7.50	6.12	9.14
Miscellaneous					19.19	21.65	18.97	21.14	12.62	9.75	6.54	6.19	8.37
Miscellaneous Crossovers					26.35	19.21	18.73	18.37	11.50	7.70	6.02	4.90	6.52
Average for the Month for Plan 2					23.91	16.77	14.99	15.19	9.90	7.01	4.61	4.11	5.58
<b>Total</b>													
Inpatient Hospital	17.00	15.00	17.00	15.00	28.58	32.01	26.68	24.22	19.50	19.66	8.81	11.62	17.53
Inpatient Hospital Crossovers	13.00	12.00	14.00	10.00	29.75	19.48	19.70	22.55	15.31	10.34	8.60	6.48	14.36
Outpatient Hospital	13.00	11.00	12.00	12.00	12.45	10.86	8.63	8.08	6.48	3.28	2.54	2.38	2.91
Outpatient Hospital Crossovers	25.00	19.00	19.00	16.00	25.10	17.25	17.38	17.52	13.27	9.23	5.46	5.55	8.25
Professional	14.00	13.00	11.00	11.00	20.53	15.78	10.05	9.52	7.14	4.48	3.25	3.08	3.70
Professional Crossovers	17.00	13.00	12.00	13.00	23.32	15.47	13.15	13.49	8.60	6.10	3.92	3.51	4.44
Nursing Home	14.00	14.00	15.00	15.00	15.76	28.24	14.90	23.77	16.07	14.94	8.81	12.29	7.22
Nursing Home Crossovers	12.00	18.00	15.00	9.00	22.60	14.33	19.00	24.66	18.89	11.60	7.50	6.12	9.14
Miscellaneous	24.00	17.00	18.00	17.00	22.97	21.12	17.57	17.71	12.52	8.10	5.59	5.16	6.19
Miscellaneous Crossovers	0.00	0.00	0.00	0.00	26.39	19.28	18.75	18.41	11.77	7.72	6.02	4.95	6.57
Average for the Month	16.00	13.00	14.00	12.00	20.12	16.00	11.64	11.30	8.28	5.27	3.67	3.40	4.21

\* The reporting of average processing days before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

\*\* Average processing days on claims adjustments used to be reported by the previous administrator. Average processing days will not be reported on claim adjustments beginning with April 2005. Therefore, they have not been reported in this report for any month.

\*\*\* Higher than normal claim average resulting from clean up of aged medical review claims

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
HIRSP CLAIMS INVENTORY AS OF DECEMBER 2005 MONTH END (12/27/2005)**

Pended Claims Data	Dec 2004* # of Claims	Jan 2005* # of Claims	Feb 2005* # of Claims	Mar 2005** # of Claims	Apr 2005*** # of Claims	May 2005*** # of Claims	June 2005** # of Claims	July 2005** # of Claims	Aug 2005** # of Claims	Sep 2005** # of Claims	Oct 2005** # of Claims	Nov 2005** # of Claims	Dec 2005** # of Claims
<b>Prior to Entry</b>													
Total					1,056	1,443	1,087	747	873	271	339	289	200
<b>Pre-System Suspend</b>													
Plan 1A					3,954	1,734	1,292	854	1,003	470	624	920	568
Plan 1B					2,946	1,284	926	721	859	391	475	754	593
Plan 2					2,318	1,035	1,420	1,066	826	305	287	631	209
Total				20,482	9,218	4,053	3,638	2,641	2,688	1,166	1,386	2,305	1,370
Total Over 30 Days Old					1,696	736	322	64	6	0	1	0	9
<b>System Pended</b>													
<b>Plan 1A</b>													
Inpatient Hospital					232	256	140	142	54	63	53	60	79
Inpatient Hospital Crossovers					2	2	0	0	0	1	1	0	3
Outpatient Hospital					759	660	519	564	144	151	95	94	95
Outpatient Hospital Crossovers					20	10	6	10	1	3	0	0	0
Professional					4,347	3,606	2,908	3,091	1,302	1,262	804	631	815
Professional Crossovers					46	34	35	40	7	10	5	5	1
Nursing Home					29	25	25	27	11	6	2	4	0
Nursing Home Crossovers					0	0	0	0	0	0	0	0	0
Miscellaneous					1,146	873	684	790	276	234	150	199	269
Miscellaneous Crossovers					3	2	11	3	0	0	3	1	2
Total Plan 1A					6,584	5,468	4,328	4,667	1,795	1,730	1,113	994	1,264
Total Over 30 Days Old					1,856	1,778	1,163	856	463	457	269	154	100
<b>Plan 1B</b>													
Inpatient Hospital					143	144	95	106	56	59	40	43	55
Inpatient Hospital Crossovers					2	2	1	0	0	0	0	0	0
Outpatient Hospital					495	517	397	429	171	152	77	90	85
Outpatient Hospital Crossovers					14	7	5	12	0	2	0	0	0
Professional					3,218	2,773	2,163	2,426	954	992	685	592	692
Professional Crossovers					23	26	16	26	7	13	6	0	5
Nursing Home					8	2	6	8	6	5	2	0	0
Nursing Home Crossovers					0	0	0	0	0	0	0	0	0
Miscellaneous					667	566	390	461	146	107	106	141	170
Miscellaneous Crossovers					7	2	2	1	1	4	0	0	0
Total Plan 1B					4,577	4,039	3,075	3,469	1,341	1,334	916	866	1,007
Total Over 30 Days Old					1,360	1,296	936	620	386	395	234	153	95
<b>Plan 2</b>													
Inpatient Hospital					3	1	3	5	0	2	0	0	0
Inpatient Hospital Crossovers					40	28	25	33	5	5	1	5	9
Outpatient Hospital					60	46	35	42	2	8	9	1	0
Outpatient Hospital Crossovers					329	252	292	275	24	46	27	56	44
Professional					147	87	128	141	22	16	15	5	15
Professional Crossovers					1,741	1,303	1,092	1,024	206	315	285	157	430
Nursing Home					2	3	2	1	0	0	0	0	0
Nursing Home Crossovers					18	19	8	21	0	4	7	3	3
Miscellaneous					109	101	62	68	18	13	12	25	24
Miscellaneous Crossovers					557	429	321	407	101	119	104	137	169
Total Plan 2					3,006	2,269	1,968	2,017	378	528	460	389	694
Total Over 30 Days Old					694	526	329	152	40	43	98	6	12
<b>Total</b>													
Inpatient Hospital	127	169	170	0	378	401	238	253	110	124	93	103	134
Inpatient Hospital Crossovers	15	22	16	0	44	32	26	33	5	6	2	5	12
Outpatient Hospital	699	969	650	0	1,314	1,223	951	1,035	317	311	181	185	180
Outpatient Hospital Crossovers	247	403	275	0	363	269	303	297	25	51	27	56	44
Professional	5,872	5,322	3,600	0	7,712	6,466	5,199	5,658	2,278	2,270	1,504	1,228	1,522
Professional Crossovers	580	1,190	668	0	1,810	1,363	1,143	1,090	220	338	296	162	436
Nursing Home	15	13	10	0	39	30	33	36	17	11	4	4	0
Nursing Home Crossovers	3	1	0	0	18	19	8	21	0	4	7	3	3
Miscellaneous	728	836	845	0	1,922	1,540	1,136	1,319	440	354	268	365	463
Miscellaneous Crossovers	0	0	0	0	567	433	334	411	102	123	107	138	171
Total	8,286	8,925	6,234	20,482	14,167	11,776	9,371	10,153	3,514	3,592	2,489	2,249	2,965
Total Over 30 Days Old	651	868	467	0	5,606	4,336	2,750	1,692	895	895	602	313	216
<b>Grand Total</b>	8,286	8,925	6,234	20,482	24,441	17,272	14,096	13,541	7,075	5,029	4,214	4,843	4,535

\* The reporting of inventory numbers before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

\*\* Prior administrator claim inventory is zero due to transition of plan administration to WPS. 1,807 claims were pending and transferred to WPS on March 31st. WPS received 20,482 HIRSP claims from providers and the prior administrator during the period 3/14/2005 - 3/31/2005.

\*\*\* Claim adjustments have been reported in the non-Crossover categories on history prior to April 2005. Claim adjustments are not included in any category beginning with April 2005.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## MEDICAL CLAIMS DENIED REPORT\*

AS OF DECEMBER 2005 MONTH END (12/27/2005)

Processed Month	Plan 1A		Plan 1B		Plan 2		All Plans			Denial Rate
	Paid	Denied	Paid	Denied	Paid	Denied	Paid	Denied	Total	
December 2004	16,889	5,819	12,715	4,376	6,458	2,602	36,062	12,797	48,859	26.2%
January 2005	12,980	4,239	9,710	3,192	4,542	1,741	27,232	9,172	36,404	25.2%
February 2005	12,985	5,197	9,862	3,935	4,884	2,011	27,731	11,143	38,874	28.7%
March 2005	9,529	3,403	7,389	2,752	3,297	1,479	20,215	7,634	27,849	27.4%
April 2005	10,223	2,143	7,789	1,678	4,185	1,109	22,197	4,930	27,127	18.2%
May 2005	18,903	4,196	14,308	3,387	7,814	2,475	41,025	10,058	51,083	19.7%
June 2005	18,296	3,908	14,232	3,010	7,388	2,385	39,916	9,303	49,219	18.9%
July 2005	13,476	3,119	10,537	2,198	6,350	2,121	30,363	7,438	37,801	19.7%
August 2005	17,126	4,083	13,743	3,027	8,691	2,787	39,560	9,897	49,457	20.0%
September 2005	15,492	3,082	12,347	2,516	6,780	2,389	34,619	7,987	42,606	18.7%
October 2005	13,794	2,865	11,291	2,233	6,187	2,140	31,272	7,238	38,510	18.8%
November 2005	15,724	3,410	13,322	2,554	6,785	2,282	35,831	8,246	44,077	18.7%
December 2005	13,668	2,631	12,146	2,377	5,176	2,067	30,990	7,075	38,065	18.6%

\* Claims denied by the PBM are not included. See page 30 for claims denied by the PBM.

A claim may have some paid lines and some denied lines. Therefore, a claim that has both paid and rejected lines has been counted as a paid claim and as a denied claim. This results in more total claims being reported in this report than in the report titled Claims That Have Finalized to Payment or Denial Report.

### December 2005 MONTH END DENIAL REASON DETAIL

Denial Reason	Volume	Top 10 Reasons for Denial
18/DU	2072	DUPLICATE CLAIM/SERVICE.
23	754	CLAIM DENIED/REDUCED BECAUSE CHARGES HAVE BEEN PAID BY ANOTHER PAYER AS PART OF COORDINATION OF BENEFITS.
49	607	NONCOVERED SERVICES BECAUSE THIS A ROUTINE EXAM OR SCREENING PROCEDURE DONE IN CONJUNCTION OF A ROUTINE EXAM.
27/28	525	EXPENSE(S) INCURRED OUTSIDE COVERAGE PERIOD ARE NOT COVERED.
HW	459	SERVICES PERFORMED BY A PROVIDER WHO IS NOT MEDICAID CERTIFIED ARE NOT COVERED
51	430	THIS IS A PREEXISTING CONDITION. MEDICAL RECORDS OBTAINED FROM YOUR PROVIDER HAVE IDENTIFIED A PRE-EXISTING CONDITION.
XZ	315	WE WILL BE ABLE TO COMPLETE PROCESSING OF THIS CLAIM WHEN WE RECEIVE THE MEDICAL RECORDS WE REQUESTED.
EM	286	WE NEED THE MEDICARE EXPLANATION OF BENEFITS TO PROCESS THIS CHARGE.
IS	276	THIS PROCEDURE IS INCIDENTAL TO AND CONSIDERED PART OF THE PRIMARY PROCEDURE.
SU	203	IN ORDER TO PROCESS BENEFITS CORRECTLY, THIS LINE WAS SPLIT FOR PROCESSING.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.



**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**  
**PHARMACY CLAIMS DENIED REPORT**  
**As of December 2005 Month End (12/31/2005)\***

<b>Processed Month</b>	<b>Denied</b>
December 2004	8,555
January 2005	8,664
February 2005	7,627
March 2005	8,304
April 2005	25,472
May 2005	21,252
June 2005	16,979
July 2005	18,594
August 2005	16,907
September 2005	15,659
October 2005	15,723
November 2005	15,980
December 2005	16,712

**END OF MONTH DECEMBER 2005 DENIAL REASON DETAIL**

<b>Top 10 Reasons for Denial</b>	<b>Volume</b>
DUR Rejected Error-Interaction Drugs	6,878
NDC Not Covered	2,914
Plan Limitation Exceeded	2,692
Refill Too Soon	1,672
Filled After Coverage Terminated	750
Duplicate Paid/Captured Claim	605
Missing/Invalid Dispense as Written Code	433
Missing/Invalid Sex Code	118
Non-Matched Cardholder ID	108
Claim Too Old	92

**\* Each prescription processed and denied is counted as one claim**

**Note the different end of month date from previous reports in this packet.  
This is due to these figures being taken from a production PBM report  
rather than from the current HIRSP plan administrator's reporting files.**

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Claims Accuracy Performance \*

December 2005

### Medical

Month	Total Number of Claims	Total of Claims Payments	Total Claim Payments Reviewed	Total Correct Payment	Accuracy Rate
January-2005	36,404	\$6,551,366.00	\$95,201.00	\$95,201.00	100
February-2005	38,874	\$6,256,306.00	\$80,016.00	\$80,016.00	100
March-2005	27,849	\$5,125,139.00	\$58,769.00	\$58,769.00	100
April-2005	28,646	\$4,001,294.29	\$67,258.90	\$67,605.30	99.49
May-2005	46,570	\$8,593,111.00	\$77,521.77	\$76,450.29	98.60
June-2005	44,024	\$10,505,466.00	\$66,752.92	\$64,063.42	99.06
July-2005	38,336	\$7,386,440.00	\$94,437.38	\$94,034.95	99.88
August-2005	45,262	\$9,697,518.00	\$78,001.06	\$77,852.92	99.92
September-2005	39,905	\$7,532,770.00	\$72,997.80	\$70,504.52	98.85
October-2005	38,172	\$7,999,534.00	\$69,663.84	\$73,140.50	99.03
November-2005	37,290	\$7,067,849.37	\$41,414.03	\$41,679.24	99.79
December-2005	37,741	\$7,736,381.08	\$41,647.93	\$44,948.25	98.10
<b>Quarterly Total</b>	<b>113,203</b>	<b>\$22,803,764.45</b>	<b>\$152,725.80</b>	<b>\$159,767.99</b>	<b>98.94</b>

\* This report is prepared on a processed date basis using all dates in a calendar month versus other reports that are prepared on a schedule that uses the standard end of month processing dates. Therefore, claims data in this report will not agree with claims data on other reports.

# Wisconsin Health Insurance Risk Sharing Plan

## Appeals and Grievance

December, 2005

### Claim Appeals

Total Claim Appeals Received	46
Billing/Claim Processing	1
Drug & Drug Formulary	5
Enrollment/Eligibility Requirements	9
Not Covered Benefit	8
Not Medically Necessary	19
Plan Administration	4
Total Claims Reinstatements Closed	44
Claim Appeals Average Number of	8.428

### Grievances

Grievance Committee	
Drug & Drug Formulary	2
Enrollment/Eligibility Requirements	7
Not Covered Benefit	2
Not Medically Necessary	4
Plan Administration	3